

NOTICE OF WATER WELL DECOMMISSIONING

Instructions

Complete by printing in ink or typing the appropriate information. Submit the completed form to the above address within 60 days of decommissioning. This form is to be completed by water well contractor or pump installation contractor (owner signature not required) for all wells decommissioned after 7/1/2001, except for sandpoint wells. For wells decommissioned prior to 7/1/2001, or for a sand point well, the well owner may complete and sign the form if they did the actual decommissioning or if the well no longer exists, and it is unknown when the decommissioning occurred or who decommissioned the well.

1. Well Owner Name: _____

Address: _____

City: _____ State: _____ Zip: _____

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Home Phone Number Work Phone Number

2. Person Completing Decommissioning (if not owner)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

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Business Phone Number Contractor's License Number

3a. Well Registration Number _____

3b. Purpose of Well _____

3c. Date Well Last Operated _____

3d. Date of Decommissioning _____

3e. Location of Well: _____ 1/4 of the _____ 1/4, Section _____
Township _____ Range _____ E W
County _____

3f. The well is _____ feet from the (N S) section line
and _____ feet from the (E W) section line **OR**
Latitude Degree _____ Minutes _____ Second _____
Longitude Degree _____ Minutes _____ Second _____

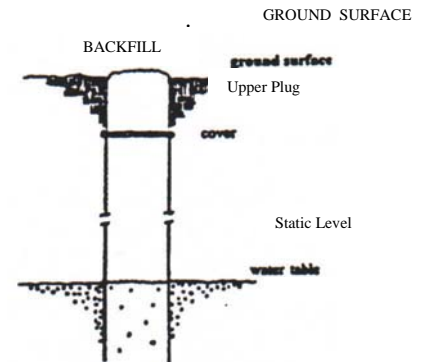
3g. Street Address of Block, Lot and Subdivision (if applicable).

3h. Location of Water Use: _____ 1/4 of the _____ 1/4, Section _____
Township _____ Range _____ E W
County _____

FOR DEPARTMENT USE ONLY

Filing Date	Registration Number
Owner Code	NRD
_____ - _____ - _____	

4a. Actual Method for Decommissioning of Well. Use Sketch below (if appropriate), or illustrate method of decommissioning on a separate sheet.



4b. Type of Back Fill Used in Upper Plug. (If excavated area is greater than three feet, indicate depth of excavation.)

4c. Illustrate method to create upper plug.

4d. Type, Amount, and Location of Materials Used in Lower Casing.

4e. Type and Thickness of Materials Used Between Confining Layers and at static water levels. Indicate plug depth(s) on left side of sketch.

4f. Well Casing Size _____

4g. Bore Hole Diameter _____

I hereby certify that the information provided on this form is true and accurate to the best of my knowledge.

Water Well Contractor's Signature

Date

Well Owner's Signature

Date

The Department reserves the right to request verification of information provided.